



Washington State  
Department of Health  
Board of Osteopathic Medicine and Surgery  
Meeting Minutes  
September 15, 2006

The meeting of the Washington State Board of Osteopathic Medicine and Surgery was called to order by Daniel Dugaw, DO, Chair, at 9:05 a.m. The meeting was held at: St. Francis Hospital, 34515 9<sup>th</sup> Avenue South, Board Room, Federal Way, Washington 98003.

Board Members Present: Daniel Dugaw, DO, Chair  
Thomas Shelton, DO  
William Gant, Public Member  
Thomas Bell, DO  
Catherine Hunter, DO  
Roger Ludwig, DO

Staff Present: Blake Maresh, Executive Secretary  
Melissa Burke-Cain, Assistant Attorney General  
Arlene Robertson, Program Manager  
Maryella Jansen, Deputy Executive Director  
Judy Young, Staff Attorney  
Joe Mihelich, Administrative Staff

Guests Attending: Laurie Jenkins, Assistant Secretary  
Karl Hoehn, Legal Service Manager  
Kathi Itter, Executive Director,  
Washington Osteopathic Medical Association

Open Session

1. Call to Order
  - 1.1 Approval of Agenda  
The agenda was approved as published.

- 1.2 Approval of Minutes - August 4, 2006 meeting  
The August 4, 2006 meeting minutes were approved as submitted.
2. 9:30-10:30 a.m. - Disciplinary Process Update:  
Noncompliance, sanctions, and HB 2974 impacts  
Presentation by Karl Hoehn, Legal Service Manager
  - 2.1 Proposed Disciplinary Guidelines
  - 2.2 Implementation of HB 2974  
2006 Legislation pertaining to mandatory reports, mandatory denial or suspension, impacts on investigations

Mr. Hoehn provided updates on recent changes to several of the disciplinary processes.

An expedited process that does not involve further investigation has been established to handle some noncompliance cases. The Compliance Officer will identify noncompliance with the conditions specified in the order. The Board will review the case to determine if substantial noncompliance has occurred and whether to authorize use of the fast track process. After notice, a "fast track" hearing for suspension of the credential (orders only) is scheduled. Monetary noncompliance would be sent to a collection agency.

Sanction guidelines have been developed and implemented for use with the Secretary Professions. There are seven conduct categories: sexual contact, abuse, drug diversion, felony convictions, practice below the standard of care, misuse of drugs and alcohol, and noncompliance. The sanctions are based upon the severity of the conduct and take into consideration aggravating or mitigating circumstances. Grids are used to determine the severity of the action. A list of sanctions and conditions can be used in determining appropriate remedial actions. Boards and Commissions are requested to use the guidelines on a trial basis and provide feedback on any problems they have in their use. It is hoped that Boards and Commissions will adopt the Guidelines.

Mr. Hoehn spoke about implementation of several portions of HB 2974. The bill addresses mandatory reporting rules, mandatory denials of applications, and mandatory summary suspensions. The Secretary has been directed to adopt rules related to mandatory reports. Although many boards/commissions already have mandatory reporting rules, a coordinated effort will involve all professions during the

rulemaking process. Another mandate of the law will require denial of an application, or summary suspension of a current license, if the individual has been prohibited from practice in another state for conduct that is substantially similar to unprofessional conduct in Washington. The disciplining authority will make a final determination on the status of the license.

3. 10:30 a.m.-11:30 p.m. - Reorganization: Status update  
Presentation by Laurie Jenkins, Assistant Secretary

Ms. Jenkins provided an overview of the process that has been occurring over the last several months to review the activities of Health Systems Quality Assurance Division. It has involved outlining a mission statement and strategic planning of priorities. The objectives of the reorganization are to improve patient safety, increase public confidence, and adopt a thorough approach to system improvements. Five offices have emerged as the result of input on several levels. Although there is not an exact staffing plan yet, the new offices will be: Health Professions and Facilities, Customer Service, Inspection and Compliance, Legal Services, and Community Health Systems. There is still a great deal of work to be done before any structure changes can be made. Ms. Jenkins indicated that her goal is to coordinate the implementation with the beginning of the new biennium in July 2007.

Ms. Jenkins responded to questions from the Board.

4. Rules
  - 4.1 Standards for Use of Laser, light, radiofrequency and plasma devices - Rules adopted by the Medical Quality Assurance Commission for physicians and physician assistants - Determine if the Board should consider rules for osteopathic physicians and osteopathic physician assistants

#### ISSUE

The Board has been monitoring the rule-making activities of MQAC related to the use of laser devices and other similar medical devices. These are devices classified for use as prescriptive devices by the Federal Food and Drug Administration (FDA). MQAC has defined the use of these devices as the practice of medicine. As medical devices they are used to topically penetrate the skin and alter human tissue.

There are a wide variety of individuals using these devices ranging from physicians, nurses, cosmetologists, estheticians, and unlicensed individuals. Some services are being provided under the supervision of a physician, other individuals have no medical oversight and some may be inadequately trained to use the devices on patients.

#### ACTION

The Board determined that laser and other medical devices have the potential to cause harm if not used properly. The devices are prescription devices and should be used under the direction of a practitioner whose scope allows them to prescribe. The Board determined to begin the rules process for use of the devices by osteopathic physicians and osteopathic physician assistants.

#### 5. Practice Issues

5.1 Discuss patient safety initiatives being pursued by the Department of Health. (Standing Agenda Item)  
There were no new items for discussion.

#### 6. Program Manager Reports

##### 6.1 Budget Report - September 2006

Ms. Robertson provided the September 2006 budget report. As previously reported, the budget remains in a significant deficit due to disciplinary activities.

The Board asked that additional allocation be requested for the next biennium.

##### 6.2 Washington Physicians Health Program - July 2006 Statistical Information

The most recent statistical report was provided. No action was needed.

#### 7. Executive Director Reports

Mr. Maresh reported he is involved in a Division project to determine the feasibility of obtaining an imaging system and identifying the type that would be most effective for the Division.

Mr. Maresh reported that replacing staff for several vacant positions in the section was currently a priority.

The Division also has a project to look at ways to improve obtaining clinical experts needed to review cases that are in the disciplinary process.

Mr. Maresh indicated in addition to the verbal feedback the Board had provided regarding the draft opioid dosage guidelines, the Board might also consider sending their comments to the workgroup in writing. Dr. Hunter will assist staff in drafting a letter that summarizes the Board's concerns.

8. (Open Session) Settlement Presentations  
(Presentations are contingent upon agreements being reached between the parties prior to a board meeting.)  
Deliberations are held in Executive Session.

There were no settlement presentations.

9. Determine 2007 Meeting Dates

The following meeting dates for 2007 are:

January 26  
March 23  
May 18  
July 27  
September 21  
November 30

10. Election of Officers

Dr. Dugaw was re-elected Chair; Bill Gant was elected Vice-Chair.

#### Closed Session

11. Investigative Authorizations

Three reports were reviewed. One case was forwarded to ISU and one case was put on hold pending disposition of cases already in process. The following case was closed Below Threshold:

2006-09-0003OP

12. Disciplinary Case Reviews - Reviewing Board Member Reports

<u>CASE NUMBER</u>	<u>DISPOSITION</u>
2006-02-0001OP	Closed no cause for action; Evidence does not support a violation.

12.1 Statement of Allegations/Stipulation to Informal  
Disposition presentations (*Presentations are  
contingent upon agreements being reached  
between the parties prior to a board meeting.*)  
Deliberations are held in Executive Session.

There were no Informal Dispositions for review.

13. Compliance Issues

There were no compliance issues for discussion.

14. Application Review

There were no applications for review.

The meeting was adjourned at 12:45 p.m.

Respectfully Submitted

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Arlene Robertson  
Program Manager

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